§416.269

- §416.269 What is done to determine whether your earnings are too low to provide comparable benefits and services you would receive in the absence of those earnings.
- (a) What we determine. We must determine whether your earnings are too low to provide you with benefits and services comparable to the benefits and services you would receive if you did not have those earnings (see §416.265(d)).
- (b) How the determination is made. In determining whether your earnings are too low to provide you with benefits and services comparable to the benefits and services you would receive if you did not have those earnings, we compare your anticipated gross earnings or a combination of anticipated and actual gross earnings, as appropriate) for the 12-month period beginning with the month for which your special SSI eligibility status is being determined to a threshold amount for your State of residence. This threshold amount consists of the sum for a 12-month period of two items, as follows:
- (1) The amount of gross earnings including amounts excluded under §416.1112(c) (4), (5) and (7) that would reduce to zero the Federal SSI benefit and the optional State supplementary payment for an individual with no other income living in his or her own household in the State where you reside. This amount will vary from State to State depending on the amount of the State supplementary payment; and
- (2) The average expenditures for Medicaid benefits for disabled and blind SSI cash recipients, including recipients of federally administered State supplementary payments only, in your State of residence.
- (c) How the eligibility requirements are met. (1) You meet the requirements in §416.265(d) if the comparison shows that your gross earnings are equal to or less than the applicable threshold amount for your State, as determined under paragraphs (b) (1) and (2) of this section. However, if the comparison shows that these earnings exceed the applicable threshold amount for your State, we will establish (and use in a second comparison) an individualized threshold taking into account the total amount of:

- (i) The amount determined under paragraph (b)(1) of this section that would reduce to zero the Federal SSI benefit and State supplementary payment for your actual living arrangement:
- (ii) The average Medicaid expenditures for your State of residence under paragraph (b)(2) of this section or, if higher, your actual medical expenditures in the appropriate 12-month period:
- (iii) Any amounts excluded from your income as impairment-related work expenses (see §416.1112(c)(6)), work expenses of the blind (see §416.1112(c)(8)), and income used or set aside for use under an approved plan for achieving self support (see §416.1112(c)(9)); and
- (iv) the value of any publicly-funded attendant care services as described in paragraph (d) of this section (including personal care assistance).
- (2) If you have already completed the 12-month period for which we are determining your eligibility, we will consider only the expenditures made in that period.
- (d) Attendant care services. Expenditures for attendant care services (including personal care assistance) which would be available to you in the absence of earnings that make you ineligible for SSI cash benefits will be considered in the individualized threshold (as described in paragraph (c)(1) of this section) if we establish that they are:
 - (1) Provided by a paid attendant;
- (2) Needed to assist with work-related and/or personal functions; and
- (3) Paid from Federal, State, or local funds.
- (e) Annual update of information. The threshold amounts used in determinations of sufficiency of earnings will be based on information and data updated no less frequently than annually.

[59 FR 41404, Aug. 12, 1994; 59 FR 49291, Sept. 27, 1994]

Subpart C—Filing of Applications

AUTHORITY: Secs. 702(a)(5), 1611, and 1631 (a), (d), and (e) of the Social Security Act (42 U.S.C. 902(a)(5), 1382, and 1383 (a), (d), and (e)).

SOURCE: 45 FR 48120, July 18, 1980, unless otherwise noted.

GENERAL PROVISIONS

§416.301 Introduction.

This subpart contains the rules for filing a claim for supplemental security income (SSI) benefits. It tells you what an application is, who may sign it, who must file one to be eligible for benefits, the period of time it is in effect, and how it may be withdrawn. It also tells you when a written statement or an oral inquiry may be considered to establish an application filing date.

§416.302 Definitions.

For the purpose of this subpart—

Benefits means any payments made under the SSI program. SSI benefits also include any federally administered State supplementary payments.

Claimant means the person who files an application for himself or herself or the person on whose behalf an application is filed.

We or us means the Social Security Administration (SSA).

You or your means the person who applies for benefits, the person for whom an application is filed or anyone who may consider applying for benefits

§416.305 You must file an application to receive supplemental security income benefits.

- (a) General rule. In addition to meeting other requirements, you must file an application to become eligible to receive benefits. If you believe you may be eligible, you should file an application as soon as possible. Filing an application will—
- (1) Permit us to make a formal determination whether or not you are eligible to receive benefits;
- (2) Assure that you receive benefits for any months you are eligible to receive payment; and
- (3) Give you the right to appeal if you disagree with the determination.
- (b) *Exceptions*. You need not file a new application if—
- (1) You have been receiving benefits as an eligible spouse and are no longer living with your husband or wife;
- (2) You have been receiving benefits as an eligible spouse of an eligible individual who has died;

- (3) You have been receiving benefits because you are disabled or blind and you are 65 years old before the date we determine that you are no longer blind or disabled.
- (4) A redetermination of your eligibility is being made and it is found that you were not eligible for benefits during any part of a period for which we are making a redetermination but you currently meet the requirements for eligibility;
- (5) You are notified that your payments of SSI benefits will be stopped because you are no longer eligible and you again meet the requirements for eligibility before your appeal rights are exhausted.

[45 FR 48120, July 18, 1980, as amended at 60 FR 16374, Mar. 30, 1995; 64 FR 31972, June 15, 1999]

APPLICATIONS

§ 416.310 What makes an application a claim for benefits.

An application will be considered a claim for benefits, if the following requirements are met:

- (a) An application form prescribed by us must be filled out.
- (b) be filed at a social security office, at another Federal or State office we have designated to receive applications for us, or with a person we have authorized to receive applications for us. See §416.325.
- (c) The claimant or someone who may sign an application for the claimant must sign the application. See §§ 416.315 and 416.320.
- (d) The claimant must be alive at the time the application is filed. See §§ 416.340, 416.345, and 416.351 for exceptions.

[45 FR 48120, July 18, 1980, as amended at 59 FR 44926, Aug. 31, 1994]

§416.315 Who may sign an application.

We will determine who may sign an application according to the following rules:

(a) If you are 18 years old or over, mentally competent, and physically able, you must sign your own application. If you are 16 years old or older